## Congress of the United States Washington, DC 20515

September 10, 2021

The Honorable Nancy Pelosi

Speaker

U.S. House of Representatives

Washington, DC 20515

The Honorable Kevin McCarthy

Minority Leader

U.S. House of Representatives

Washington, D.C. 20515

The Honorable Chuck Schumer

Majority Leader

U.S. Senate

Washington, D.C. 20515

The Honorable Mitch McConnell

Minority Leader

U.S. Senate

Washington, DC 20515

Dear House Speaker Pelosi, House Minority Leader McCarthy, Senate Majority Leader Schumer, and Senate Minority Leader McConnell,

As Congress negotiates a budget reconciliation to invest in our families and communities, we respectfully request that this resolution include increased funding to support those struggling with addiction and mental health challenges. We applaud the *American Rescue Plan Act of 2021*'s inclusion of nearly \$4 billion in funding for mental health and substance use programs, however more is needed as communities continue to battle both COVID-19 and the overdose crises. In a September 2020 follow-up survey on adverse mental health symptoms among Americans during the pandemic, symptoms such as anxiety and depression remained prevalent, suggesting that negative mental or behavioral health conditions related to COVID-19 are not transient. Increased support for expanded mental health care access and integrated medical and behavioral health services is necessary to mitigate the mental health effects of COVID-19.

In order to continue to build off of the bold investments in the American Rescue Plan, we urge the consideration of the following investments to support those struggling with substance use disorder (SUD) and mental health disorders through expanded access to care and a more vital workforce:

- Repeal the Medicaid Inmate Exclusion policy to allow incarcerated individuals to access the Medicaid standard of care; and
- Fund \$300 million for the Behavioral Health Workforce Education and Training (BHWET) Program.

## Repeal of the Medicaid Inmate Exclusion Policy

Providing Medicaid and its standard of care can improve prison and jail health systems across the country by ensuring treatment for SUD and mental illness, protecting public health through the treatment of infectious diseases, and reducing recidivism. Medicaid is a critical source of behavioral health services; however, federal law continues to prohibit the use of Medicaid funds for services provided to an "inmate of a public institution." This discriminatory policy towards the justice-

<sup>&</sup>lt;sup>1</sup> https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2776559

involved population results in health care churn both when they become incarcerated and upon reentry into the community. Continuity of care for those struggling with addiction and mental health is vital: an estimated two-thirds of incarcerated individuals in jails and more than half of state prisoners have a SUD. Furthermore, an incarcerated individual's risk of death within the first two weeks of release is more than 12 times that of other individuals, with the leading cause of death being fatal overdose. We urge the repeal of the Medicaid Inmate Exclusion Policy to allow for the justice involved population to access continuous, quality behavioral health care.

## Bold Investment in Behavioral Health Care Workforce

The American Rescue Plan included \$100 million for the Behavioral Health Workforce Education and Training Program (BHWET) to increase access to behavioral health services through a more vital workforce. This program is critical to serving the mental health needs of our most vulnerable, underserved communities through investments in a more resilient behavioral health workforce pipeline. With the number of individuals experiencing adverse mental health symptoms and substance use during the COVID-19 pandemic, we must make further investments in our workforce to meet the unmet need for mental health services. We encourage the inclusion of \$300 million for the BHWET program to improve equity in access to mental and behavioral health care in rural and underserved communities.

As you consider bold investments in human infrastructure, we urge you to include the above measures to address the overdose and mental health crisis in this country. Recently released data from the Centers for Disease Control (CDC) shows that over 93,000 drug overdose deaths were reported in 2020. This is the highest number of overdoses on record and nearly a 30% increase from 2019. While we are only beginning to learn the magnitude of our nation's mental health and addiction crises in the wake of the COVID-19 pandemic, it is paramount that we continue to dedicate resources to fighting these epidemics through direct investments in our most vulnerable communities.

Sincerely,

Ann McLane Kuster Member of Congress

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David Trone